## "ST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

10575

757

OLAMO 40 EU 20												$-1\Delta\Delta$
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER SMALL	
TOTAL CLAIMS			28					RATE	FEE	OR 1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEI	355.00	OR	BASIC FEE	
TO	TAL CHARGE	ABLE CLAIMS	28 minus 20=		. 8			X\$ 9=		OR	X\$18=	144.00
INI	DEPENDENT C	LAIMS	// minus 3 =		' /			X40=		1		80.00
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT			$\neg \neg$		A40=		OR	X80=	80.00
* If the difference in column 1 is less than zero, enter "0" in column 2								+135=		OR	+270=	
						column 2		TOTAL		OR	TOTAL	97400
	C	(Column 1)	AMENDE	MENDED - PART II (Column 2) (Column 3)				SMALL	ENTITY	OR	OTHER SMALL I	
-	CLAIMS		HIGH			ST			ADDI-			
AMENDMENT A		REMAINING AFTER AMENOMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL FEE
	Total	.07	Minus	**		=		X\$ 9=		OR	X\$18=	
¥	Independent	NTATION OF M	Minus	•••		=	, [	X40=		OR	X80=	
	FINST PRESE	ENTATION OF M	LTIPLE DEPENDENT		CLAIM			+135=		OR	+270=	
							•	TOTAL		OR	TOTAL	
		(Column 1)		(Calu	01	(O-1 0)	P	DDIT. FEE			ADDIT. FEE	
	(क्या जावा क्या कर कर के किया कर कर के किया कर कर किया किया कर किया किया कर किया किया किया किया किया किया किया किया किया किया किया किया किया किया किया	CLAIMS	HERMAN TOWN	(Colur		(Column 3)						
AMENDMENT B		REMAINING AFTER AMENDMENT	EMAINING NUM		BER SUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	1.91	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	• 4	Minus	***		=	I	X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		H			UR		
										OR	+270=	
(	0/18/04						A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
	7,9	(Column 1)		(Colum	n 2)	(Column 3)	٠					
AMENDMENT C		CLAIMS		HIGH			Г		ADDI-	ſ		4001
		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.24	Minus	••		=	r	X\$ 9=		OR	X\$18=	ï
	Independent	• 4	Minus	***		=	┢			ı		
	FIRST PRESENTATION OF MU		LTIPLE DEPENDENT		CLAIM			X40=		OR	X80=	
• 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  OR ADDIT. FEE ADDIT. FEE												
1	i vie inignest Nur he "Highest Num	mber Previously Pa ber Previously Paid	ud For IN THIS d For (Total or	s SPACE is Independe	less thai nt) is the	n 3, enter "3." highest number		_	rooriate boy			